



Unique Patient Identification in Zimbabwe

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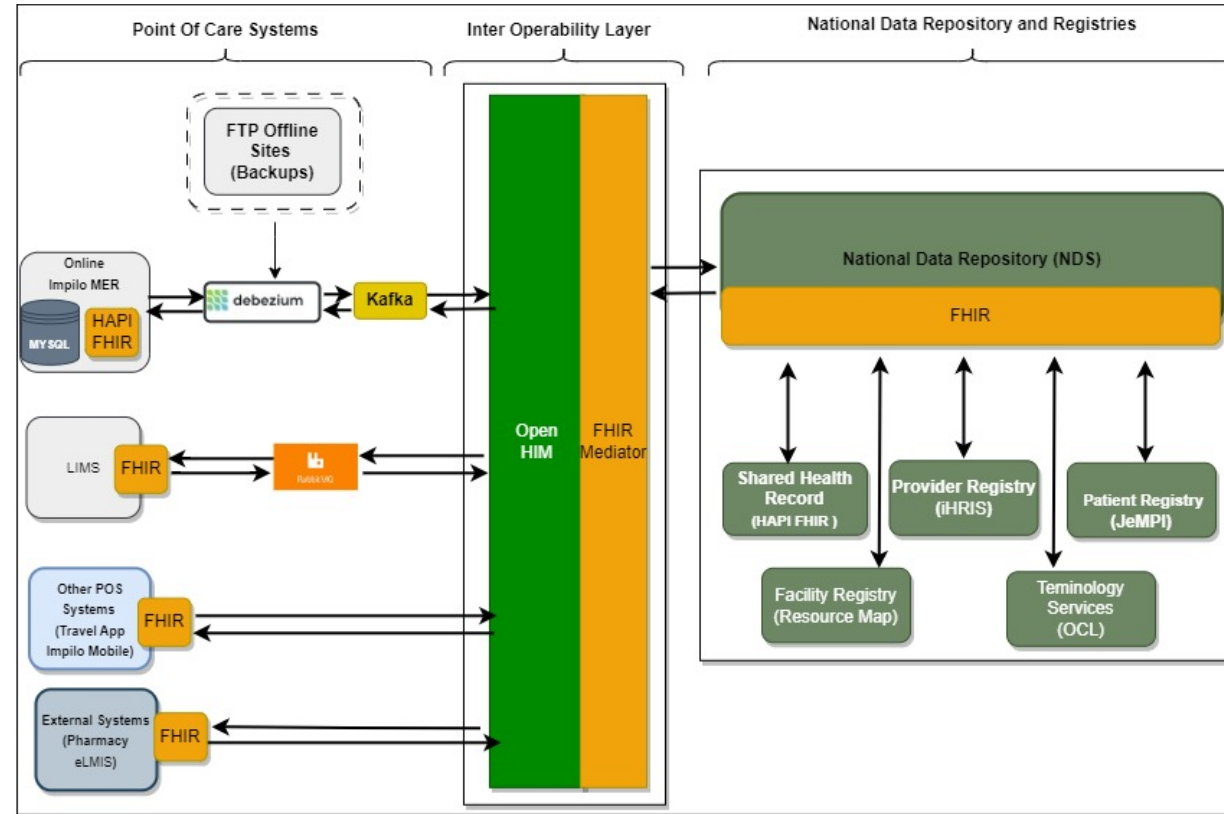


Introduction

- The Zimbabwe Electronic Health Care System (Impilo E.H.R) consists of two types of facilities.
 1. Online Facilities:
 - They have connection to central repository and can transmit data in real time.
 2. Offline Facilities:
 - They do not have direct connection to central repository and data is manually uploaded to the central repository
- Zimbabwean Health system does not enforce the use of national identifiers like ID Number , Passport Number to be used as mandatory identifiers of patients in Impilo E.H.R
- Patient identification is done at both facility level and central level
- A person id (System generated) is used to identify patients in E.H.R
- MoH currently pursuing legislation on the use of National ID or Patient ID



Zimbabwe Digital Health Platform



LEGEND

iHRIS : IntraHealth International
 HAPI : HL7 Application Programming Interface
 OpenHIM : Open Health Information Mediator
 FHIR : Fast Healthcare Interoperability Resources
 MySQL : Relational Database Management System
 eLMIS : Logistics Management Information Systems
 LIMS : Laboratory Information Management System



Zimbabwe HIE Technology Stack

Point of Service



An **HIE in a Box** with a **context-specific** collection of components that fit required **roles** as described in the **OpenHIE architecture** specifications.

Principles:

- Horizontally Scalable
- Configurable and Extensible
- Standards-based

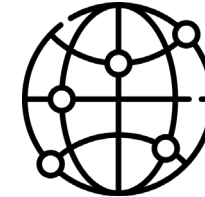
Interoperability & Data Pipelines



Infrastructure, Maintenance, & Security



Registries and Repositories



OCL



NDR



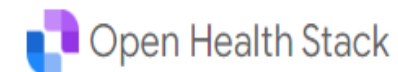
HAPI FHIR

SHR

Analytics and Reporting



Power BI





Use Cases

Patient Level

Continuity of care:

- To ensure that all relevant information about a patient's health history, diagnoses, allergies, and treatments is readily available to any healthcare professional involved in their care.

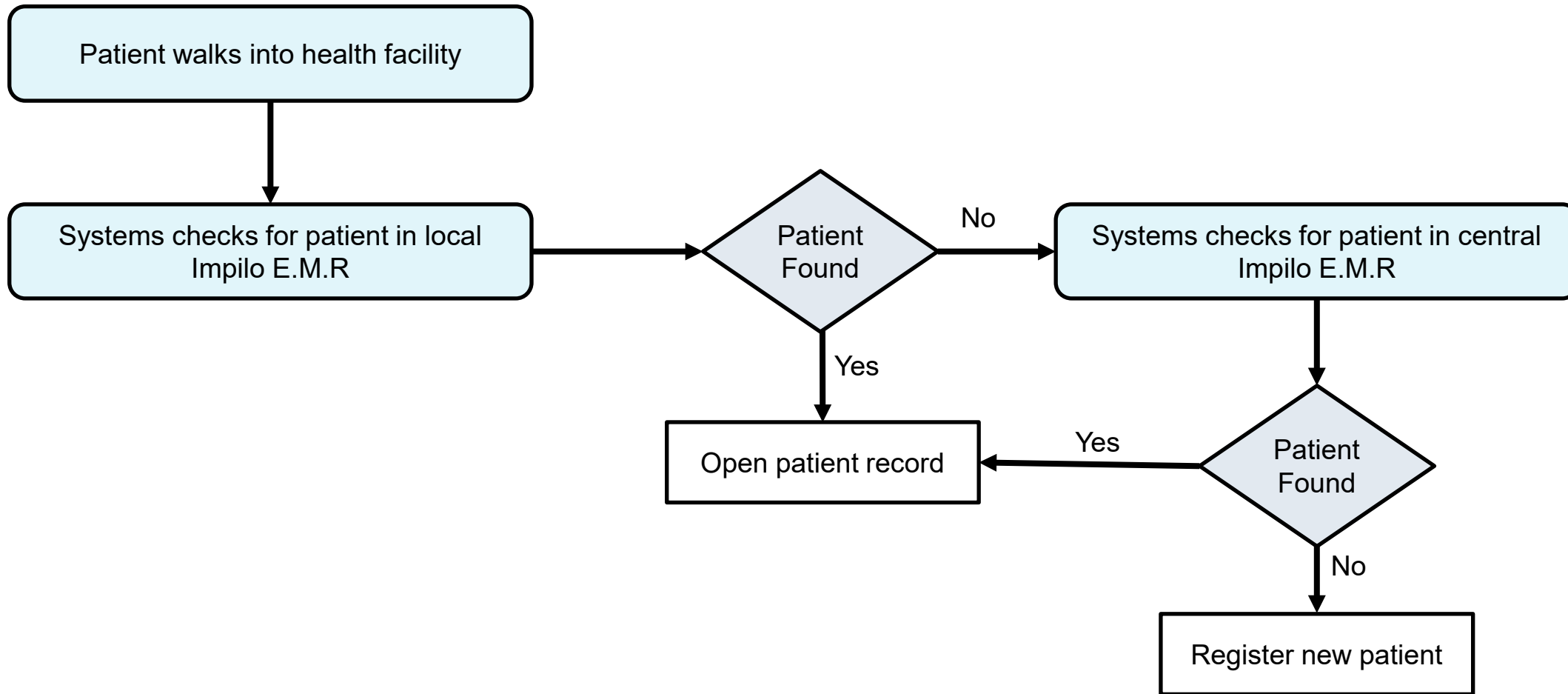
Service Delivery Level

Public health management:

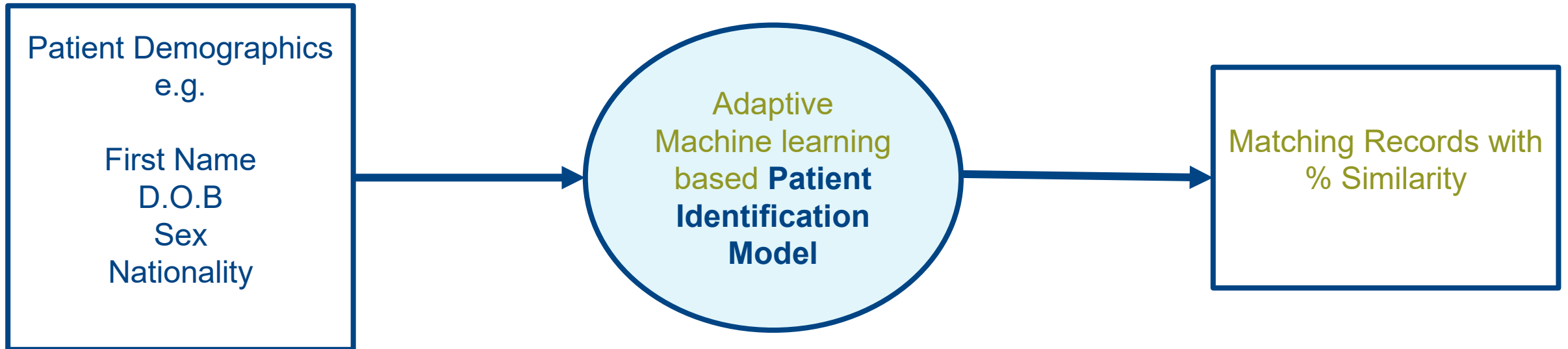
- Accurate identification helps public health agencies track the spread of diseases, monitor outbreaks, and implement appropriate interventions to protect communities' health.



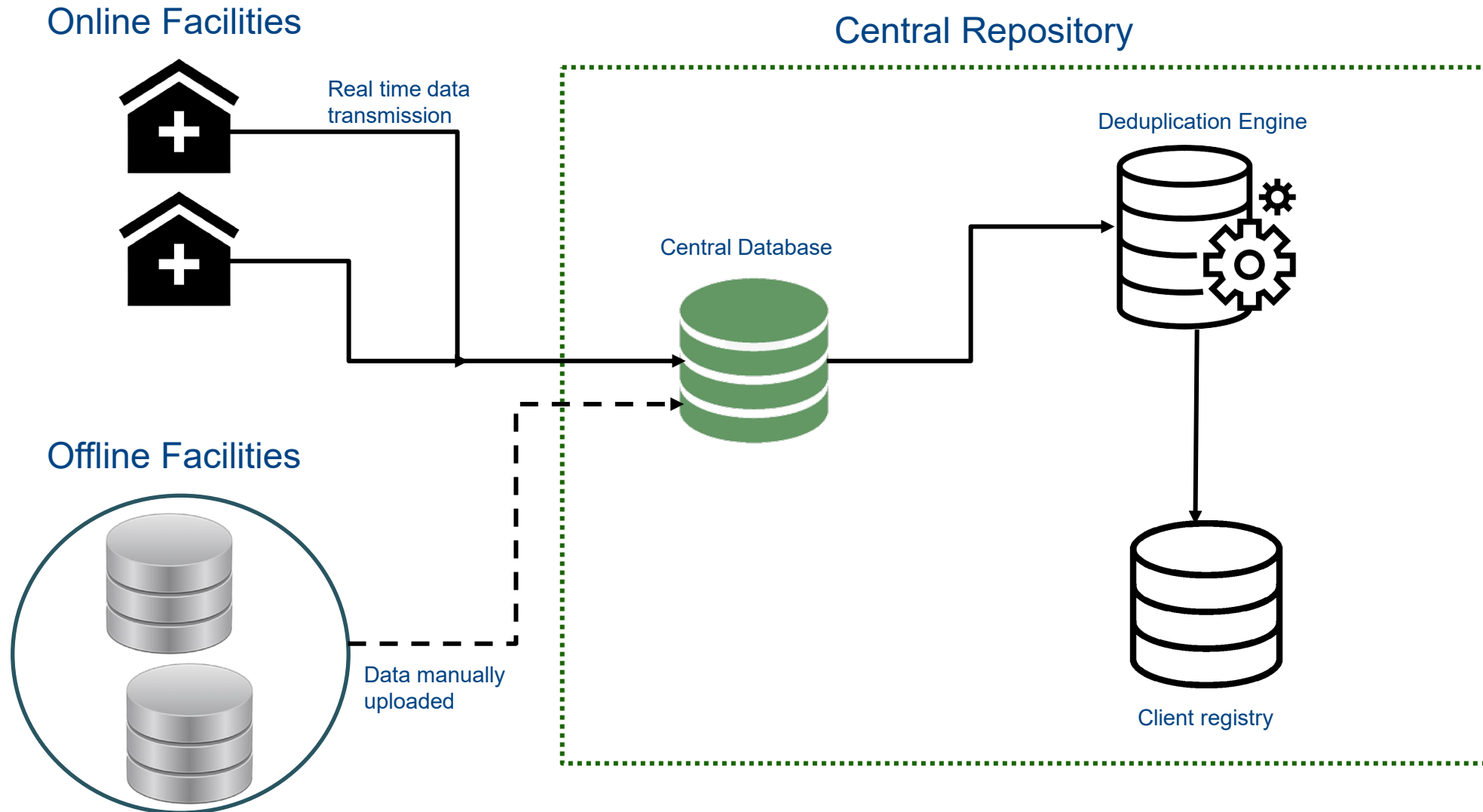
Current Implementation at Facility



Current Implementation at Facility



Current Implementation at Central Level





Challenges with Patient identification

- No unique identifier for patients
- Some Zimbabwean regions have very similar names which makes it difficult to deduplicate.
- Most of the facilities are offline hence making it impossible to deduplicate in real-time at the central level.
- Unlike Malawi or Zambia, the Zimbabwe Government is yet to implement a VPN or government-wide area network connecting facilities
 - There is one used by a legacy system (connected to 350 sites) currently being resuscitated
- A lot of nomadic patients

Future plan for Patient identification

Use of biometrics : - Fingerprint reader
Iris Scanner



Advantages in Zim Context

Improved patient identification: Biometrics can increase accuracy in uniquely identifying patients

Time savings: Biometric authentication increase speed of searching for patients.

Accessibility: a good use case for unconscious patients, it's easy to use the fingerprint to identify the patient (for already registered)

Scalability: Biometric systems can easily scale up to accommodate large numbers of patients without compromising accuracy or efficiency.

A prototype has already been developed

Disadvantages in Zim Context

Cost: Implementing biometric technology can be expensive. The cost of purchasing and maintaining biometric devices, software, and infrastructure can be a significant barrier.

Infrastructure limitations: Biometric use will have a limitation on facilities that are offline





Thank You!

